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0010/PTO Rev. 6/95		U.S. Department of Commerce Patent and Trademark Office		Attorney Docket Number		C 2845 PCT/US																																												
<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b>				First Named Inventor		MOUSSOU, Philippe																																												
				<i>COMPLETE IF KNOWN</i>																																														
				Application Number																																														
				Filing Date																																														
				Group Art Unit																																														
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<input type="checkbox"/> Declaration Submitted with Initial Filing    OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing																																																		
<p>As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <div style="border: 1px solid black; padding: 5px; text-align: center;"><b>ESTERS OF FLAVONOIDS WITH <math>\omega</math>-SUBSTITUTED C6-C22 FATTY ACIDS</b></div> <p style="text-align: center;"><i>(Title of the invention)</i></p> <p>the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) <span style="border: 1px solid black; padding: 2px;">06/11/2004</span> as United States Application Number or PCT International</p> <p>Application Number <span style="border: 1px solid black; padding: 2px;">PCT/EP2004/006281</span> and was amended on (MM/DD/YYYY) <span style="border: 1px solid black; padding: 2px;"></span> (if applicable).</p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.</p> <p>I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.</p> <table border="1" style="width: 100%;"><thead><tr><th rowspan="2">Prior Foreign Application Number(s)</th><th rowspan="2">Country</th><th rowspan="2">Foreign Filing Date (MM/DD/YYYY)</th><th colspan="2">Priority</th><th colspan="2">Certified Copy Attached?</th></tr><tr><th>Not Claimed</th><th></th><th>YES</th><th>NO</th></tr></thead><tbody><tr><td rowspan="6">03013899.4</td><td rowspan="6">EP</td><td rowspan="6">06/20/2003</td><td><input type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td><input checked="" type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table> <p><input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:</p> <p>I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.</p> <table border="1" style="width: 100%;"><thead><tr><th>Application Number(s)</th><th>Filing Date (MM/DD/YYYY)</th><th rowspan="2"><input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.</th></tr></thead><tbody><tr><td>  </td><td>  </td></tr></tbody></table>								Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?		Not Claimed		YES	NO	03013899.4	EP	06/20/2003	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.	  	  
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**DECLARATION****Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP2004/006281	06/11/2004	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number  or label   
OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John F. Daniels	34,314		
Jane E. Alexander	36,014		
Arthur G. Seifert	28,040		
Daniel S. Ortiz	25,123		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number  or label **23657** OR ☐ Fill in correspondence address below

Name	Jane E. Alexander				
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Inventor's Signature					Date		
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Post Office Address							
City	54000 Nancy	State		Zip		Country	France
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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										ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Aude			Middle Initial		Family Name	Falcimaigne			Suffix e.g. Jr.			
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Post Office Address													
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Inventor's Signature									Date				
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City	54000 Nancy			State		Zip		Country	France			Applicant Authority	
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Inventor's Signature									Date				
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Post Office Address													
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Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Inventor's Signature									Date				
Residence: City	Nancy			State		Country	France			Citizenship	France		
Post Office Address	5, rue de Begonias												
Post Office Address													
City	54000 Nancy			State		Zip		Country	France			Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto													